
ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

yes no

Ms.

Mr. Artist STEVEN DOUGLAS McCALLUM

(Last Name Last)

Permanent

Address

1083 PARKSIDE DR. ALLIANCE

Street

City

44601

Tel. (216) 821-9313

Zip

Area Code

Temporary or
Studio Address

UNIVERSITY OF AKRON

Street

City

Tel. (216) 357-7010

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in?

WORK IN SUMMIT COUNTY

MATTHEW

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

- Artist will pick up at Museum.
 Museum should dispose of.
 Museum should ship to artist C.O.D. at this address:
-
-

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

Stev D. McCallum

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 13, 1979.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Stev D. McCallum

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

ACRYLIC

"ALTAR PIECE: THE BLESSED MIAMI CABANA"

Title

Price or NFS	Insurance Value if NFS Only	Size
1,200 ⁰⁰		88"X96"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame

ACCEPTED

✓

DO NOT WRITE IN THIS SECTION

ABcD

REJECTED

ACCEPTED

✗

REJECTED

134 (1)

2

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ACCEPTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

RECEIVED

REJECTED

REJECTED

DATE

2/12/17